



Prenatal Care Workshop - Prenatal Care Examination Techniques

Learning Objectives for Prenatal Care

By the end of the session, learners will be able to:

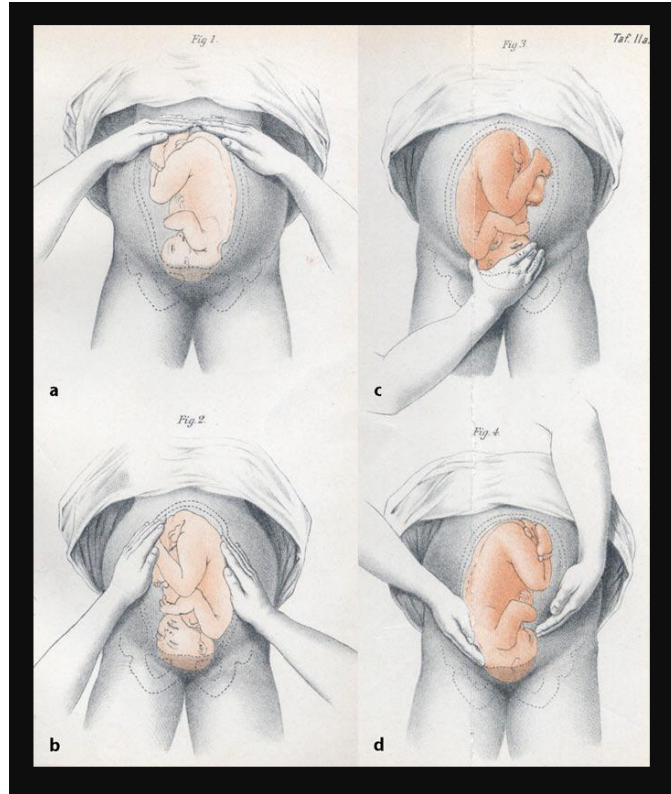
1. Demonstrate the correct techniques on a pregnant patient of the following: fetal heart tones by electronic Doppler, measurement of fundal height and determination of fetal position using Leopold Maneuvers.
2. Using the stated estimated delivery date (EDD), determine the estimated gestational age (EGA) at the time of the visit.
3. Become familiar with documenting a prenatal examination.
4. Record the visit findings on the prenatal examination document.

Prenatal Examination Techniques

1. Introduce yourself to the patient and explain what you are going to do. Since you are in a team, each person should introduce themselves and one person explain the exam stating that each student will each do each part of the exam so it will be several exams. You should state the examination will be of the abdomen only.
2. Wash or sanitize your hands.
3. Ask patient if she would like you to wear gloves for the abdominal exam
4. Ask the patient when she is due – this is the EDD. Using the EDD, use a pregnancy calculator app to determine the estimated gestational age on this date and record on the examination document.
5. Measure the fundal height: Video: [How to Measure Your Fundal Height](#) ^[12]
 - a. Locate the top of the pubis symphysis by palpation.
 - b. Place the 0 marker of the paper measuring tape at the pubis symphysis.
 - c. Use your other hand to palpate the top of the uterus (fundus).
 - d. Stretch the paper tape from the pubis to the fundus in the midline.
 - e. The measurement in centimeters is the fundal height.

6. Determine fetal presentation using Leopolds Maneuvers: Video: [Fundamentals of Fetal Health Surveillance – Leopolds Maneuvers](#)

- a. First Maneuver: Facing the patient, place both hands on either side of the fundus and palpate. If the baby is head down, then you will be palpating the buttocks which are soft. If the fetus is in the breech position with head up towards the patient’s head, then the top part will feel hard.
- b. Second Maneuver: Slide hands down from the fundus to the midsection. You will be palpating along the sides of the uterus at the level of the umbilicus. You are looking for the back and limbs. The back will be continuously palpable from the fundus whereas the limbs will feel irregular and lumpy.
- c. Third Maneuver: Place one hand with the thumb extended and the four fingers together at the pubis. Press gently to grasp the head or breech (called the presenting part). Gently shake the presenting part to determine consistency (hard or soft) and mobility (mobile or fixed). Using the table below, determine the fetal presentation. Engagement refers to the descent of the presenting part into the pelvis which happens at term.



Presenting part	Mobility	Presentation
Head (hard)	Mobile	Vertex, Unengaged
Head (hard)	Fixed	Vertex, Engaged
Buttocks (soft)	Mobile	Breech, Unengaged
Buttocks (soft)	Fixed	Breech, Engaged

- d. Fourth Maneuver: Stand facing the patient’s feet and place both hands on the sides of the uterus. Slide both hands towards the pubis and palpate the presenting part. If it is vertex, then you may be able to feel the fetal brow and back of the head.

Note: Body habitus can make it hard to palpate the fetus and even experienced examiners may find it hard to determine presentation. Fetal position may change day to day and even hour to hour, so a breech presentation is not a concern.

7. Listen for the fetal heart.
 - a. Place a small dab of ultrasound gel on the abdomen over the fetal back.
 - b. Turn on the doppler and place it on the gel.
 - c. Listen for the fetal heart and record the rate. You may need to angle the doppler head to hear it or move it to a different site.

Note: The fetal heart is best heard over the fetal back. If you cannot locate, asking the patient where it is usually heard before is often helpful. The doppler will pick up both the patient's aorta and fetal heart. The heart rate is the key to differentiating the two - the fetal heart rate is 120-180 bpm and the patient's heart is slower. Checking the radial pulse can be helpful to determine the patient's heart rate which you can then compare to the doppler.

8. Document your findings on the prenatal examination document. Hand your document to your instructor to protect patient privacy and comply with HIPAA.